


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 24, 2004 08:00 AM
Secretary of State

DOCUMENT # L98000000296
 1. Entity Name
HAROLD O. MILLER ATTORNEY, L.C.



Principal Place of Business 7350 SOUTH TAMIAMI TRAIL STE. 210 SARASOTA, FL 34231	Mailing Address 7350 SOUTH TAMIAMI TRAIL STE. 210 SARASOTA, FL 34231
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DO NOT WRITE IN THIS SPACE



02062004No Chg-LLC CR2E083 (10/03)

4. FEI Number 17-1285044	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 MILLER, HAROLD O
 7350 SOUTH TAMIAMI TRAIL
 STE. 210
 SARASOTA, FL 34231

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MILLER, HAROLD O 7350 SOUTH TAMIAMI TRAIL, STE. 210 SARASOTA, FL 34231
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 05/24/04-80006-012 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **5-12-04**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #